Form R-125JV, January 2007

Nebraska Department of Roads

Request for Bidding Proposal Forms for Joint Ventures

Mail
Hold for Pickup
Fed-Ex
Account No.

Proposal forms to be used for bidding purposes will be issued jointly to contractors who are each individually currently prequalifed to bid in accordance with the Nebraska Department of Roads' rules and regulations.

This form must be completed, signed and filed with this Department before 5:00 p.m., Lincoln time, on the day preceding the letting. Bidding documents will not be issued if requested by any other means.

Individuals authorizing their company to be in the joint venture must be authorized to bid for their company as set forth on

Ve are requesting bidding proposal forms for the following project(s) to be bid as a joint venture in the	page 20 or 21 of their company's prequalification package.				
Company: Company: Company: Company: Company: Company: Company: Street Address: P.O. Box: City: State: Company Signatures Company Name: Person in Authority (Printed) Person in Authority (Signature) Company Name: Person in Authority (Printed)	We are requesting bidding proposal forms for the following project(s) to be bid as a joint venture in the letting.				
Company: Company: Company: Joint Venture Address Street Address: P.O. Box: City: State: Zip Code: Phone: Fax: Company Signatures Company Name: Company Name: Person in Authority (Printed) Person in Authority (Signature) Company Name: Person in Authority (Signature) Person in Authority (Printed) Person in Authority (Printed) Person in Authority (Printed) Person in Authority (Printed)	Call Order: Project No.:				
Company: Company: Joint Venture Address Street Address: P.O. Box: City: State: Zip Code: Phone: Fax: Company Signatures Company Name: Company Name: Person in Authority (Printed) Person in Authority (Printed) Person in Authority (Signature) Company Name: Company Name: Person in Authority (Signature) Person in Authority (Printed) Person in Authority (Printed) Person in Authority (Printed)	Joint Venture Names	Group(s) of Work to Perform			
Company: Joint Venture Address	Company:				
Street Address	Company:				
Street Address: P.O. Box: City: State: Zip Code: Phone: Fax: Company Signatures Company Name: Company Name: Person in Authority (Printed) Person in Authority (Signature) Company Name: Company Name: Person in Authority (Signature) Company Name: Company Name: Person in Authority (Printed)	Company:				
Street Address: P.O. Box: City: State: Zip Code: Phone: Fax: Company Signatures Company Name: Company Name: Person in Authority (Printed) Person in Authority (Printed) Person in Authority (Signature) Person in Authority (Signature) Company Name: Company Name: Person in Authority (Printed) Person in Authority (Printed) Person in Authority (Printed)	Company:				
P.O. Box: City: State: Zip Code: Phone: Fax: Company Signatures Company Name: Company Name: Person in Authority (Printed) Person in Authority (Signature) Person in Authority (Signature) Person in Authority (Printed) Person in Authority (Printed) Person in Authority (Printed) Person in Authority (Printed)	Joint Vent	cure Address			
Phone: Fax: Company Signatures Company Name: Company Name: Person in Authority (Printed) Person in Authority (Printed) Person in Authority (Signature) Company Name: Company Name: Person in Authority (Printed) Person in Authority (Printed)	Street Address:				
Company Signatures Company Name: Person in Authority (Printed) Person in Authority (Signature) Person in Authority (Signature) Company Name: Person in Authority (Printed) Person in Authority (Printed) Person in Authority (Printed)	P.O. Box: City:	State: Zip Code:			
Company Signatures Company Name: Person in Authority (Printed) Person in Authority (Signature) Company Name: Person in Authority (Signature) Company Name: Person in Authority (Printed) Person in Authority (Printed) Person in Authority (Printed)	Phone:	Fax:			
Person in Authority (Printed) Person in Authority (Printed) Person in Authority (Signature) Company Name: Person in Authority (Printed) Person in Authority (Printed) Person in Authority (Printed)		⁷ Signatures			
Person in Authority (Printed) Person in Authority (Printed) Person in Authority (Signature) Company Name: Person in Authority (Printed) Person in Authority (Printed) Person in Authority (Printed)	Company Name:	Company Name:			
Person in Authority (Signature) Company Name: Person in Authority (Signature) Company Name: Person in Authority (Printed) Person in Authority (Printed)					
Company Name: Person in Authority (Printed) Person in Authority (Printed) Person in Authority (Printed)	Person in Authority (Printed)	Person in Authority (Printed)			
Person in Authority (Printed) Person in Authority (Printed)	Person in Authority (Signature)	Person in Authority (Signature)			
Person in Authority (Printed) Person in Authority (Printed)					
	Company Name:	Company Name:			
	Person in Authority (Printed)	Person in Authority (Printed)			
Person in Authority (Signature)	Person in Authority (Signature)	Person in Authority (Signature)			

Each individual contractor must fill this sheet out.

List below all uncompleted construction work under contract at this time, both in and out of Nebraska, including subcontracts and work not yet awarded but on which you are the apparent low bidder. Complete all columns as indicated. If you have no uncompleted construction work, state "None."

Use additional sheets if necessary. Electronically generated sheets using the same format may be attached.

Contracted From	Location	Type of Work	Total Amount of Contract	Approx. Amount Earned	Amount Received	Probable Completion Date MoDay-Yr.	Do Not Write in This Column
Totals							
Company Name:							

Company Name:	
By:	
	(Signature)

Send to: Nebraska Department of Roads Contracts Section, Room 104

1500 Hwy. 2 P.O. Box 94759

Lincoln, NE 68509-4759 Fax: (402) 479-3803